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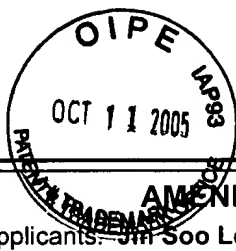
TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/902,664
		Filing Date	July 12, 2001
		First Named Inventor	Jin Soo Lee
		Art Unit	2151
		Examiner Name	Dhairya A. Patel
Total Number of Pages in This Submission	22	Attorney Docket Number	24286/81101

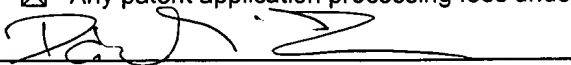
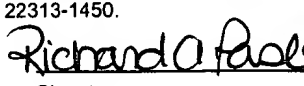
ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Return Receipt Postcard
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	PTO 1449 form and copies of references
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	Ferenc Pazmandi, Limited Recognition No. L0078
Signature	
Date	October 7, 2005

CERTIFICATE OF TRANSMISSION/MAILING	
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Typed or printed name	Richard A. Pask
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Date	October 7, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) and application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



AMENDMENT FEE TRANSMITTAL LETTER			Docket No. 24286/81101		
Applicants: Jun Soo Lee et al.					
Serial No. 09/902,664	Filing Date July 12, 2001	Examiner Dhairya A. Patel	Group Art Unit 2151		
Invention: Apparatus and Method for Processing Description Information of Multimedia Data					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	52 -	27 =	25	X \$50	\$1,250.00
INDEP. CLAIMS	7 -	4 =	3	X \$200	\$600.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
Fee for Filing Information Disclosure Statement					\$180.00
Fee for Filing Three-Month Extension of Time					\$1,020.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$3,050.00
<div><input type="checkbox"/> No additional fee is required for amendment.</div> <div><input checked="" type="checkbox"/> Please charge Deposit Account No. 50-1597 in the amount of \$3,050.00.</div> <div><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</div> <div><input type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1597<div><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</div><div><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div></div>					
<div> Ferenc Pazmandi Agent of Record Limited Recognition No. L0078</div>			Dated: October 7, 2005		
<div>I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to : Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div> <div><div><u>10/7/05</u> Date</div><div> Signature</div></div>					